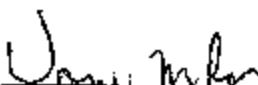
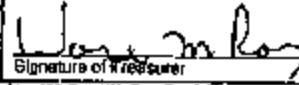


CANDIDATE'S REPORT

(to be filed by a candidate or his principal campaign committee)

1. Qualifying Name and Address of Candidate Wayne M. Roy 6995 Bayou Paul Rd St. Gabriel, LA. 70776		2. Office Sought (Include title of office as well as parish, city, town and/or election district.) Iberia Parish Council Iberiaville St. Gabriel, LA. District 13	OFFICE USE ONLY 1903 Sep 1/20
3. Date of Primary <u>10-4-2003</u>		This report covers from <u>10-26-2003</u> through <u>1-20-2004</u>	
4. Type of Report: <input type="checkbox"/> 180th day prior to primary <input type="checkbox"/> 40th day after general <input type="checkbox"/> 90th day prior to primary <input checked="" type="checkbox"/> Annual (future election) <input type="checkbox"/> 30th day prior to primary <input checked="" type="checkbox"/> Supplemental (past election) <input type="checkbox"/> 10th day prior to primary <input type="checkbox"/> 10th day prior to general <input type="checkbox"/> Amendment to prior report			
5. FINAL REPORT IS: <input type="checkbox"/> Withdrawn <input checked="" type="checkbox"/> Filed after the election AND all loans and debts paid <input type="checkbox"/> Unopposed			
6. Name and Address of Financial Institution (You are required by law to use one or more banks, savings and loan associations, or money market mutual fund as the depository of all campaign funds.) Burlington Federal Credit Union 1508 S. Burlington Greenville, LA. 70237	7. Full Name and Address of Treasurer Wayne M. Roy 6995 Bayou Paul Rd St. Gabriel, LA. 70776		
8. Name of Person Preparing Report <u>Wayne M. Roy</u> Daytime Telephone <u>225-642-5545</u>			
10. WE HEREBY CERTIFY that the information contained in this report and the attached schedules is true and correct to the best of our knowledge, information and belief, and that no expenditures have been made nor contributions received that have not been reported herein, and that no information required to be reported by the Louisiana Campaign Finance Disclosure Act has been deliberately omitted.		9. FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY a. Name and address of principal campaign committee, committee's chairperson, and subsidiary committees, if any (use additional sheets if necessary).	
This <u>20th</u> day of <u>January</u> , <u>2004</u>  Signature of Candidate/Chairperson (To be signed by Chairperson only if report by principal campaign committee)		Daytime Telephone <u>225-642-5545</u>  Signature of Treasurer (To be signed by Treasurer only if report by principal campaign committee)	

SUMMARY PAGE

RECEIPTS	This Period
1. Contributions (Schedule A-1)	
2. In-kind Contributions (Schedule A-2)	
3. Campaign paraphernalia sales of \$25 or less	
4. TOTAL CONTRIBUTIONS (Lines 1 + 2 + 3)	
5. Other Receipts (Schedule A-3)	
6. Loans Received (Schedule B)	
7. Loan Repayments Received (Schedule D)	
8. TOTAL RECEIPTS (Lines 4 + 5 + 6 + 7)	

DISBURSEMENTS	This Period
9. Expenditures (Schedule E-1)	*64.70
10. Other Disbursements (Schedule E-2)	
11. Loan Repayments Made (Schedule B)	
12. Funds Loaned (Schedule D)	
13. TOTAL DISBURSEMENTS (Lines 9 + 10 + 11 + 12)	64.70

FINANCIAL SUMMARY	Amount
14. Funds on hand at beginning of reporting period <small>(Must equal funds on hand at close from last report or 0 if first report for this election)</small>	
15. Plus total receipts this period <small>(Line 8 above)</small>	
16. Less total disbursements this period <small>(Line 13 above)</small>	64.70
17. Less in-kind contributions <small>(Line 2 above)</small>	
18. Funds on hand at close of reporting period	—6—

SCHEDULE E-2: OTHER DISBURSEMENTS

This schedule is used to report those disbursements that are not "expenditures"; that is, monies paid by the campaign that are not paid for the purpose of supporting, opposing or otherwise influencing the nomination or election of a candidate to public office. Examples include the payment of taxes or the refund of contributions. Disbursements should be reported on this schedule only if they have not been reported elsewhere in this report. The explanation of the disbursement should state the reason the payment was made by the campaign.

1. Name and Address of Recipient	2. Date(s)	3. Explanation(s)	4. Amount(s)
St. Gabriel Catholic Church Ladies Auxiliary 3625 Hwy 75, St. Gabriel, LA 70080	1-11-2004	PARTIAL OF TOTAL Payment OF \$210.00	\$64.70
5. Total OTHER DISBURSEMENTS during this reporting period			\$64.70

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